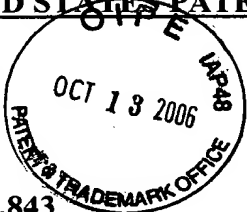


ZZW
AF

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application)
 SOPKO et al.)
 Application Number: 09/935,843)
 Filed: August 24, 2001)
 For: METHOD AND SYSTEM FOR PROVIDING)
 MAINTENANCE & MANAGEMENT SERVICES FOR)
 LONG-TERM CAPITAL EQUIPMENT OR)
 FIXTURES BY PROVIDING A PERFORMANCE)
 WARRANTY (AS AMENDED))
 Attorney Docket No. TREM.0001)



Art Unit 3629
 Special Program
 Examiner
 Fisher, Michael J

Commissioner of Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	16	16	(Over 20)	x \$50	0
Independent Claims	3	3	(Over 3)	x \$200	00
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).				x ½	
				TOTAL	0

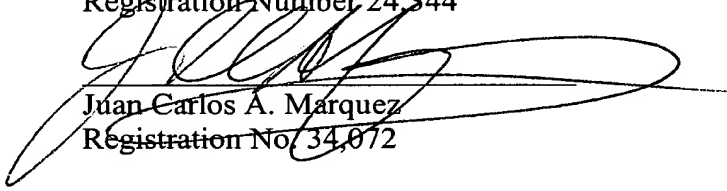
In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

- | | |
|--|--|
| [x] Response to Office Action
(no Claim Amendments) | [] Petition for Extension of Time (month) |
| [] Substitute Specification | [] Terminal Disclaimer |
| [] Preliminary Amendment | [] Letter to Draftsperson |
| [] Information Disclosure Statement | [] Assignment |
| | [x] Testimonials from Department of Veterans Affairs |

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [] A check in the amount of \$ _____ to cover the fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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October 13, 2006